

IN THE MATTER OF
JOSE M. OBLENA, M.D.

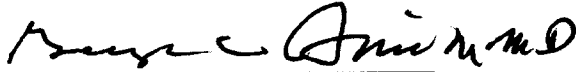
) **BEFORE THE ALABAMA BOARD OF**
) **MEDICAL EXAMINERS**
)

ORDER

This matter is before the Alabama Board of Medical Examiners on an Order to Show Cause heretofore issued by the Board on July 1, 2004 requiring Dr. Oblena to appear and show cause why his application for reinstatement of an unrestricted Alabama Controlled Substances Certificate should not be denied. A hearing was held on August 18, 2004. Dr. Oblena was present, together with his attorney, Max Pulliam, Esq. Patricia E. Shaner, Esq. represented the Board of Medical Examiners. Wayne P. Turner, Esq. served as Hearing Officer.

Based upon the evidence presented at the hearing, it is the order of the Board of Medical Examiners that Jose M. Oblena, M.D. be granted a full, unrestricted Alabama Controlled Substances Certificate. It is the further Order of the Board that all prescriptions written by Dr. Oblena for any controlled substances shall be on a triplicate prescription pad, with the original to be given to the patient, one copy to be maintained in the patient file, and the third copy to be maintained in a separate general file. Further, Dr. Oblena shall maintain a separate log of all controlled substances prescribed by him. A copy of such log shall be sent to the Board of Medical Examiners monthly for six months. Thereafter, a copy of such log shall be sent to the Board quarterly.

ENTERED this 26 day of August, 2004.



GEORGE SMITH, Chairman
Board of Medical Examiners.

SEE REVERSE FOR PRIVACY ACT INFORMATION	VOLUNTARY SURRENDER OF CONTROLLED SUBSTANCES PRIVILEGES	DEA USE ONLY
		FILE NO.

After being fully advised of my rights, and understanding that I am not required to surrender my controlled substances privileges, I freely execute this document and choose to take the actions described herein.

In view of my alleged failure to comply with the Federal requirements pertaining to controlled substances, and as an indication of my good faith in desiring to remedy any incorrect or unlawful practices on my part;

In view of my desire to terminate handling of controlled substances listed in schedule(s) 2, 2N, 3 & 3N;


I hereby voluntarily surrender my Drug Enforcement Administration Certificate of Registration, unused order forms, and all my controlled substances listed in schedule(s) 2, 2N, 3 & 3N as evidence of my agreement to relinquish my privilege to handle controlled substances listed in schedule(s) 2, 2N, 3 & 3N. Further, I agree and consent that this document shall be authority for the Administrator of the Drug Enforcement Administration to terminate and revoke my registration without an order to show cause, a hearing, or any other proceedings, (and if not all controlled substances privileges are surrendered, be issued a new registration certificate limited to schedule(s) 4 & 5).

I waive refund of any payments made by me in connection with my registration.

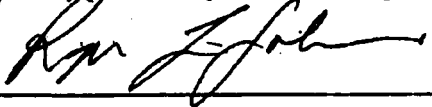
I understand that I will not be permitted to order, manufacture, distribute, possess, dispense, administer, prescribe, or engage in any other controlled substance activities whatever, until such time as I am again properly registered.

In view of the above statements, I also surrender my Alabama Controlled Substances Certificate in Schedules II, IIN, III, IIIN, ~~IV, IVN~~.

RS - RS 50

NAME OF REGISTRANT (Print) <u>JOSE M. OBLENA</u>		ADDRESS OF REGISTRANT <u>1720 HWY. 78E. STE. 11</u> <u>OXFORD, AL 36203</u>	
SIGNATURE OF REGISTRANT OR AUTHORIZED INDIVIDUAL 	DATE <u>5/17/02</u>	DEA REGISTRATION NO. <u>B04871910</u> <u>ACSC 19610</u>	

WITNESSES:

NAME AND DATE <u>Roger L. Johnson 5-17-02</u> 	TITLE <u>INVESTIGATOR ALBAMA</u>
NAME AND DATE <u>G. Michael Reese 5/17/02</u> <u>Michael Reese</u>	TITLE <u>AGENT - ABC NARCOTICS</u>